DATELIT	ADDLE	O ATIO	AL PER	DETI	ATION	DECADO
PAIENI	APPLI	LAHU	NFEE	VEII	AHUN	RECORD
				_		

Effective October 1, 2000

Application or Docket Number

LOMAU 108CPDVI

CLAIMS AS FILED - PART I			SMALL ENTITY			OTHER THAN						
TOTAL CLAIMS (Co		(Column	)	(Column 2)			TYPE		OR I	SMALL	- :	
TOTAL CLAIMS		2					RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			27 minus 20= *		. 7			X\$ 9=	63	OR	X\$18=	
INDEPENDENT CLAIMS 2 min			2 min	us 3 =	* (	0		X40=	_	ÖR	X80=	,
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter				r "0" in c	olumn 2	١	TOTAL	418	OR	TOTAL		
CLAIMS AS AMENDED - PAR			TII			·			OTHER			
(Column 1) (Colum					(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	F 01 4114	-	Ī	X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	OLTIPLE DEP	ENDEN	CLAIM		Ī	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)							Û,	ADDII. I LE I			ADDIT: 1 EE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	TATION OF M	Minus	***	T CL AINA	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENUEN	CLAIM		'	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	Tent.	(Column 1)			mn 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=			X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DEP	ENDEN	T CLAIM		┇╏	×		OR		
						l	+135=		OR	+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nun	nhar Praviously P	aid For" (Total or	Independ	dent) is the	e highest numbe	er for	and in the an	propriate bo	x in co	olumn 1.	